



# *American Indian Health Commission for Washington State*

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## **WORKFORCE DEVELOPMENT**

### **Position Paper December 12, 2002**

In the Indian Health Care Improvement Act, Public Law 94–437, the Congress and the President of the United States established a national goal “to provide the quantity and quality of health services which will permit the health status of Indians to be raised to the highest possible level and to encourage the maximum participation of Indians in the planning and management of those services.”

Unfortunately, the health concerns of many tribal members are inadequately addressed or treated because of the high number of health care professional vacancies in tribal health care programs. The low number of American Indians and Alaska Natives (AI/ANs) in the health professions also impacts the quality of care for tribal members as many Indians are more inclined to seek out needed care from a Native provider with whom they share a common cultural bond.

Various programs exist to recruit AI/ANs into the health professions. One program is the Northwest Portland Area Indian Health Board's (NPAIHB) Tribal Recruitment and Retention Project. A key factor in these programs' success is the education foundation that AI/AN youth receive at an early age. Decline in the academic achievement for many AI/AN children begins in the third grade – falling behind at such an early age makes it difficult for many AI/AN youth to keep up with classmates, to develop strong skills and a positive identity within the educational system, and to graduate from high school. In fact, AI/ANs in Washington State are twice as likely to lack a high school diploma (22.6%) than other residents (11.9%). Building an early foundation for all AI/AN children that enables them to learn reading, math, and science skills, to graduate from high school, and to prepare for the health professions.

Many of the following recommendations are already part of tribal, agency, institutional, and organizational strategies to improve health and education systems in Washington. The goal of these recommendations is to focus, tune, integrate, and develop existing efforts to reduce health and education disparities among AI/AN people. Our hope is that some recommendations may also be used by state agencies to implement their Centennial Accord agreements.

### **Recommendations**

1. The Department of Health (DOH), in consultation with tribal leaders and tribal health directors, should conduct an assessment of health care workers needed for tribal programs in the next ten years, factoring in population increases and other variables.
2. Tribes should advocate to Portland Area Indian Health Service (IHS) for the maintenance of IHS health professions recruitment funding targeted for Northwest tribes.
3. The American Indian Health Commission (AIHC) and NPAIHB should collaborate with Washington health agencies and organizations to identify existing programs and opportunities that encourage workforce diversity and invite AI/ANs to explore health careers.
4. AIHC and NPAIHB will work with tribal health directors to foster the desire for tribal members to pursue health careers. Methods may include:
  - Targeting existing tribal scholarship funds for healthcare related professions;
  - Creating healthcare career recruitment videos;

- Sponsoring clinical residencies, internships, clerkships, externships, preceptorships, etc.;
  - Supporting job shadowing and academic preparation programs, Project HOPE, TANF and employee training programs; and,
  - Working with DOH to better link tribes to their efforts
5. Tribes and Indian health organizations should advocate for increased funding for existing health career pipeline programs for AI/AN youth, such as the Native American Summer Nursing Institute at WSU Spokane and the IHS Health Professions Externship Program.
  6. Tribes and Indian health organizations should encourage groups interested in advocating for improvements in early education which promote Indian health career choices, including:
    - Development of elementary school curriculum that is fun and appealing to children, and that integrates AI/AN culture;
    - Creation of an AI/AN Health and Education Exemplary Institute as a clearinghouse for information on best practices, which integrates health and education programs and integrates and improves the continuity of health career pipeline programs, with the participation of the Washington Indian Education Association, Western Washington Native American Education Consortium, and Office of the Superintendent of Public Instruction; and,
    - Assistance to national service organizations such as Vista to recruit AI/AN youth and place them in Indian Country to serve as role models for AI/AN children and increased funding for other service learning programs, such as Native Corps and Washington Reading Corps, all of which may satisfy the student project high school graduation requirement while facilitating the development of AI/AN mentors and employment and connecting urban Indians with Indian Country.
  7. Tribes should continue to advocate with NPAIHB for simplification and removal of political barriers to the IHS health professions scholarship application process so more AI/AN youth will apply and encourage increased funding allocated to IHS health professions scholarships, including funding for outreach and assistance with applications.
  8. Tribes should work with the Washington Health Foundation on workforce development and promoting cultural competency.